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INFO	DRMATION	DISC	CLOSURE	Filing Date	February 13, 2002			
STATEMENT BY APPLICANT				First Named Inventor	Fallon			
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(use	e as many shee	ts as	necessary)	Examiner Name	Tesfaldet Bocure			
Sheet	1	of	1	Attorney Docket	8011-16			
Sheet		UI	I	Number	8011-16			

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Examiner initials*	Cite No.1	Document Number Number – Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Documents	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear			
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Examiner	/Tesfaldet Bocure/	Date	04/11/2008
Signature	/ restaluet bocure/	Considered	

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